

State Employee Health Plan Direct Bill Open Enrollment 2015

Agenda

- Introductions and Announcements
- Open Enrollment
- Major Changes
- Explanation of Terms
- Non-Medicare Plan Coverage Details
- Quest Lab Card/ Stormont-Vail Preferred Lab Benefit Medicare Plan Coverage Details
- Questions to Ask Yourself
- Open Enrollment Portal Instructions
- Direct Bill Call Center
- Resources
- Questions

Open Enrollment November 1 – November 30, 2014

- Your chance to make any change to your current insurance
 - This includes adding or dropping dependents
- All changes take effect January 1, 2015
- Any changes made will be effective for all of 2015

Open Enrollment November 1-November 30, 2014

- Any change made outside of this time period requires a "qualifying event"
- Remember: If you or a dependent are enrolled into Medicare you will have a "Split Enrollment"

Who is eligible for enrollment?

- Current Retirees/ Direct Bill Members
- Any eligible dependents of a current member:
 - Spouse
 - Dependent children and stepchildren under the age of 26
 - Dependent children and stepchildren over the age of 26 with a total and permanent disability

2015 Non-Medicare Plan Changes

- Plan B will no longer be offered
 - Members will need to select Plan A or High Deductible Health Plan (HDHP) C for 2015
 - Members eligible for Medicare need to select one of the Medicare options
- Coventry was purchased by Aetna
 - We will be offering Aetna for 2015
- UnitedHealthcare will no longer be offered
 - Members will need to select Aetna or BCBS

Plan A Combined Medical & Pharmacy Out-of-Pocket (OOP)
 Maximum Single: \$4,750/ Family: \$9,500

2014	2015
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Medical		Medical	
Deductible	\$300/\$600	Deductible	\$300/\$600
Co-insurance	20%	Co-insurance	20%
OOP Max	\$2,000/\$4,000	Pharmacy	
Pharmacy		Co-insurance	20%/35%/60%
Co-insurance	20%/35%/60%	Combined OOP	Max
OOP Max	\$2,750/\$5,500	Medical & Pharmacy	\$4,750/\$9,500

- I.R.S requirements for HDHP deductibles increased
 - Plan C's (HDHP) new deductible and OOP Max is:
 - \$2,600 single/\$5,200 family

2014 Network

2015 Network

Deductible	\$2,500/\$5,000	Deductible	\$2,600/\$5,200
Co-insurance	0%	Co-insurance	0%
Out-of-Pocket Max	\$2,500/\$5,000	Out-of-Pocket Max	\$2,600/\$5,200

- The Autism benefit had to be modified to comply with HB 2744
 - Annual dollar limits removed
 - Applied Behavior Analysis (ABA) services for children are the only services with an annual limit:
- Under age 7 will be limited to 1,300 hours per calendar year
- Children between age 7 but less than 19 years of age,
 Applied Behavior Analysis (ABA) services will be limited to 520 hours per calendar year

- Coverage of wheelchairs has been enhanced to allow for medically necessary motorized wheelchairs
- Coverage for prosthetics has been modified to allow for medically necessary prosthetics with electronic components or processors
- The limited coverage for eyeglasses for children with certain eye disorders has been modified to remove the dollar cap
- Compounded medication costing over \$300 will require prior authorization from Caremark if enrolled into Plan A or Plan C (HDHP)

2015 Generic Releases

Brand Name		
Abilify ODT	Oxytrol	
Abilify Tabs	Patanol	
Aggrenox	Protopic	
Aloxi	Relenza	
Axert	Teveten HCT	
Baraclude	Welchol Susp	
Doribax	Welchol Tabs	
Gleevec	Zyvox Injection	
Namenda	Zyvox Susp	
Ortho Tri-Cyclen Lo	Zyvox Tabs	

Selecting Your Non-Medicare Health Plan

- Pick a plan design (A or C (HDHP))
 - Which plan design provides the coverage you and your family need?
 - What is the total plan cost?
 - Premiums + Deductible & OOP = ?
- Review the Provider Networks
 - Each of the medical vendors uses a different provider network

Plan A Medical Coverage

2015 - Network

2015 - Non-Network

Medical		Medical		
Deductible	\$300/\$600	Deductible		\$500/\$1,500
Co-insurance	20%	Co-insurance		50%
Pharmacy				
Co-insurance	20%/35%/60%	OOP Max		
Combined OOP Max				
Medical &	\$4,750/\$9,500	Medical	\$4,7	50/\$9,500
Pharmacy				

Plan A Prescription Drug Plan

Drugs	Coverage Level
Generic	20% Co-insurance
Preferred Brand Name Drugs	35% Co-insurance
Special Case Medications	25% Co-insurance to a Max of \$75 per 30 day supply
Non-Preferred Brand Name Drugs	60% Co-insurance
Discount Tier	You pay 100% of discount cost. Does not count toward your OOP

Plan C (HDHP) Medical Coverage

2015 Network

2015 Non-Network

Deductible	\$2,600/\$5,200	Deductible	\$2,600/\$5,200
Co-insurance	0%	Co-insurance	20%
Combined Medical and Pharmacy OOP	\$2,600/\$5,200	Out-of- Pocket Max	\$4,100/\$8,200

Plan C (HDHP) Prescription Drug Plan

- Covered drugs are subject to the Network Plan C (HDHP) Deductible
- After the Deductible, the plan pays covered prescription drugs at 100% of allowed charge
- Uses same Preferred Drug List as Plan A
- Plan C (HDHP) is a creditable drug plan
- Discount Tier drugs are Not Covered drugs
 - Only eligible for Caremark's negotiated discount
 - Does not count toward OOP Max

Quest Diagnostics Preferred Lab Benefit

- Plan A 100% coverage of eligible outpatient lab tests
- Plan C (HDHP) Discount on eligible outpatient lab services
- Statewide & nationwide preferred lab vendor
 - Your doctor can draw the sample and send to Quest
 - You can visit Quest's website for collection sites
 - Services must be performed and billed by Quest
 - Online appointment scheduling available
- All Plan A & C (HDHP) members can use Quest
- Use Your Quest ID card or medical ID card

Stormont-Vail Preferred Lab Benefit

- Regional Preferred Lab vendor in northeast Kansas
- Plan A 100% coverage for eligible outpatient lab services
- Plan C (HDHP) Discounts on eligible outpatient lab services
- All Plan A & C (HDHP) members may use the Stormont-Vail draw site locations
- Labs drawn at other Cotton-O'Neil locations may be included if performed by network providers
- Show your medical ID Card to access benefit

2015 Medicare Plan Changes

- Coventry Advantra with Part D
 - Rate increase
- Coventry Advantra Part D
 - Coverage change
- First Health Part D
 - Rate increase

Explanation of Terms

- Network Provider
 - Any doctor/facility that contracts with a carrier who agrees to bill for the services you receive and accepts the plan payment amount
- Preventive Care
 - Physical Exams Well Woman, Well Man, etc...
 - Immunizations Flu shots, Allergy shots, etc...
 - Routine vision and hearing exams
 - Age Appropriate Bone Density Screening
 - Mammography
 - Colonoscopy

Medicare Plan Options

- Coventry Advantra Freedom PPO
 - Coventry Part D
 - First Health Part D
- Kansas Senior Plan C administered by Blue Cross and Blue Shield
 - With or without First Health Part D
- These plans are available for Direct Bill members enrolled in Medicare Part A and Part B
- A copy of your Medicare card is required

Coventry Advantra Freedom PPO Medicare Advantage Plan

- Medicare Advantage Plan
 - Takes the place of Medicare Part A and Part B
 - You are still responsible for Part B premium
 - Still have deductibles, co-payment and coinsurance
 - Enrollment in private Part D prescription plan
 - = loss of ALL State of Kansas Health benefits

Coventry Advantra Freedom PPO Medicare Advantage Plan

- Coverage available statewide in Kansas,
 Missouri, Oklahoma and Arkansas
 - In order to receive the highest level of benefits members should see a provider who contracts with Coventry Advantra Freedom
- You must choose between prescription drug coverage through Coventry Part D or First Health Part D

Coventry Advantra Freedom Medicare Advantage Plan

Coventry Health In-Network		Coventry Health Out-of-Network	
Deductible	\$0	Deductible	\$0
Co-Insurance	\$0	Co-Insurance	20%
Out-of-Pocket Max	\$1,000	Out-of-Pocket Max	20% No Max
Amount above Plan Allowance	Provider writes off	Amount above Plan Allowance	Member Pays
Preventive Services	Covered in Full	Preventive Services	20%
Co-Pay Primary	\$10	Co-Pay Primary	20%
Co-Pay Specialist	\$25	Co-Pay Specialist	20%

Coventry Advantra Freedom Coventry Part D

- Coverage Gap or the "Donut Hole"
 - Begins when you and your plan have paid
 \$2,960 toward your medications
 - Once you reach the coverage gap, you are responsible for the cost of brand name and some generic medications.
- Catastrophic Coverage
 - Begins when your Out-of-Pocket cost reaches
 \$4,700

Coventry Advantra Freedom Medicare Advantage Plan

2015 Coventry Part D

Prescription Drugs			
Preferred Retail and Standard Mail Order Cost Sharing			
Tier	One Month Supply Three Month Sup		
Tier 1 (Preferred Generic)	\$0	\$0	
Tier 2 (Non-Preferred Generic)	\$5 copay	\$10 copay	
Tier 3 (Preferred Brand)	\$45 copay	\$90 copay	
Tier 4 (Non-Preferred Brand)	50% of the total cost	50% of the total cost	
Tier 5 (Speciality Tier)	33% of the total cost	Not Offered	
Standard Retail Cost Sharing			
Tier	One Month Supply	Three Month Supply	
Tier 1 (Preferred Generic)	\$5 copay	\$10 copay	
Tier 2 (Non-Preferred Generic)	\$10 copay	\$20 copay	
Tier 3 (Preferred Brand)	\$45 copay	\$90 copay	
Tier 4 (Non-Preferred Brand)	50% of the total cost	50% of the total cost	
Tier 5 (Speciality Tier)	33% of the total cost	Not Offered	

Kansas Senior Plan C Medicare Supplement Plan

- Medicare Supplement
 - Pays after Medicare Part A and Part B
 - You are still responsible for Part B premium
 - Plan pays deductibles, co-payments, coinsurances as long as the service is a Medicare covered procedure and the provider accepts Medicare assignment

Kansas Senior Plan C

Medicare Supplement Plan

	KS SR Plan C Pays	You Pay
Part A	Inpatient Hospital Care: All deductible and co-insurance for Medicare covered services	\$0
	Skilled Nursing: All co-insurance for Medicare covered services	\$0
Part B	Deductible	\$0
	Out Patient Services	\$0
	Durable Medical Equipment	\$0

First Health Part D

- First Health Part D can be added to either Coventry
 Advantra Freedom or the Kansas Senior Plan C
- If enrolled in Kansas Senior Plan C with First Health Part D drug coverage, then enroll in a Private Market Medicare Part D, your First Health drug coverage will be terminated
- You can receive up to a 90 day supply of medications at the pharmacy or mail order
- The Out-of-Pocket max will be the same for a 30 or 60 day supply. A 90 day supply will have a higher Out-of-Pocket cost
- Specialty medication can only be filled on a 30 day basis

First Health Part D

- All State of Kansas drug coverage is considered creditable coverage
 - Coverage that is as good as or better than Medicare prescription drug coverage
 - You MUST have creditable drug coverage to avoid the Late Enrollment Penalty through Medicare
 - VA and Tricare are considered creditable coverage

First Health Part D

2015 First Health Part D 30/60	Day	Supp	ly,
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2015 That reduce	in and b 30,00 bay supply
Coverage Tier	Co-pay/Co-insurance
Preferred Generic Drugs	25% with \$30 max
Preferred Brand Drugs	25% with \$100 max
Non-Preferred Brand Drugs	50% with \$150 max
Specialty	33% with \$100 max
Coverage Gap – when \$2,960 is reached	Coverage continues
Catastrophic Coverage – when \$4,700 is reached	Generic/Preferred: \$2.65 All other meds: \$6.60 or 5% whichever is higher

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Delta Dental

 If you choose to opt-out of dental coverage you will <u>NOT</u> be allowed to reenroll at a later time

Dental Coverage

- Plan pays in full for 2 exams & cleanings
- Annual benefit maximum: \$1,700 per person per year

		_	Non-	
Benefit Level	PPO	Premier	Network	
Preventive Services	Covered in full	Covered in full	Allowed amount covered in full	
Basic Benefit				
Basic Restorative	50%	50%	50%	
Enhanced Benefit				33
Basic Restorative	20%	40%	40%	

Vision Benefits

Basic Vision

Enhanced Vision

Materials Co-pay Office Visit co- pay	\$25 \$50
Frame Allowance	\$100
Lenses: single vision, standard bifocal, trifocal or lenticular	100%
Contact lenses & fitting fee	\$150 \$35

Covers everything in the Basic Plan PLUS			
Frame Allowance	\$150		
High Index or Polycarbonate lenses	Up to \$116		
Progressive lenses	Up to \$165		
Scratch & UV coating	Covered in full		

Questions to Ask Yourself

- Which health plan is best for me?
 - How often do you visit the doctor?
 - How many medications do you take?
 - Compare premiums, deductibles and coinsurance
- Which health plan carrier is best for me?
 - Ask your doctor's office which insurance plans they accept
- What is the total cost to me?
 - Add it all up

Information Needed At Time Of Enrollment

- Medicare Card and Personal Representative Forms
 - If information is not currently on file
- If adding a NEW dependent you will need
 - Spouse Marriage Certificate or first two pages of Federal Tax Return 1040 or 1040A from the most current year (2013) signed and dated by employee and spouse
 - Child Birth Certificate
- Your personal information i.e. Employee ID, DOB, SSN, email address

Open Enrollment Website

- SEHP Membership Administrative Portal (MAP): https://sehp.member.hrissuite.com/
- You will need to attach electronic copies of birth certificates
 & marriage licenses if you are adding dependents during OE in MAP
 - Scans
 - Photos
- You will be able to update your information & mailing address
 - Address changes are for the health plan information can be made at any time during the year

MAP Questions: SEHPMembership@kdheks.gov

Membership Administrative Portal MAP

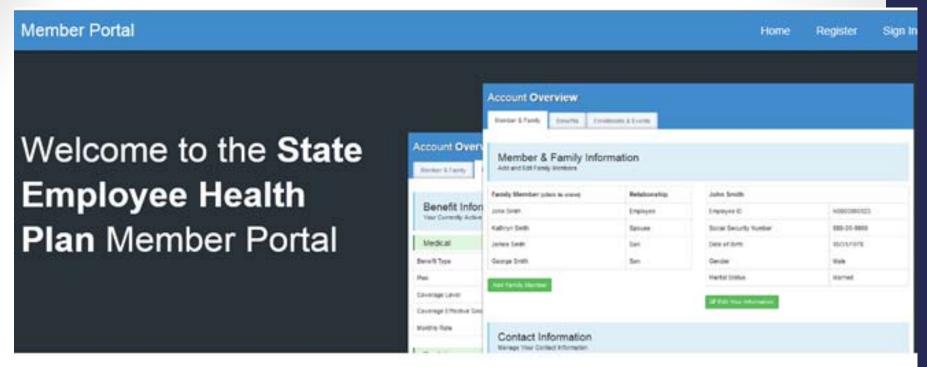
- Enroll online with any computer that has internet access
 - Do not have a computer at home? Visit your local public library or Senior Center!
- You will log in using
 - Your Kansas Employee ID
 - Your Social Security Number
 - Your Date of Birth
 - Email Address

Registering for MAP

- Because MAP contains your Protected Health Information (PHI), it is a HIPAA compliant site
- All of your information is encrypted for security
- Once registered, you will set up a unique password for future authentication

MAP Questions: SEHPMembership@kdheks.gov

Welcome To MAP



Getting Started

If this is your first time accessing the member portal, you will need to register your account and create a unique login that will provide you with access to your information.

The reg vion process is automated and can typically be completed in about one minute.

Register Now

Sign-in

If you have already registered your account, and have a username and password, you can sign-in using the link below.

If you are having trouble accessing your account, or have forgotten your username or password, please contact SEHP Membership Services at 785-296-3226 for help signing in.

Sign-in

MAP Questions: SEHPMembership@kdheks.gov

Identification Cards

- Aetna, BCBSKS and Delta Dental will send new cards to everyone
- Caremark, Superior Vision and Quest will only send cards to new members or members making changes

Open Enrollment Website

- Remember to review all contact information that is currently on file and make any necessary changes. All SEHP Benefit information will be sent to the contact information currently in MAP
 - Address, phone number, email address
- Complete the enrollment online
 - Follow the instructions on the screen and make election changes
- "Save and Submit" your changes
 - Print off the summary of changes for your records
 - An email confirmation statement will be sent to the email address provided

Open Enrollment Website

- Technical Help Desk
 - This does not apply to benefit questions
- Monday Friday: 7am 7pm (central time)
- Saturday Sunday: 9am 2pm (central time)
 - 1-800-832-5337 (Toll Free)
 - 1-913-499-4854 (KC Local)
- Email: techsupport@hrissuite.com
 - Available 24/7 and you will be contacted within 24 hours
 - Include your name, Kansas Employee ID number, phone number, and explanation of issue

Direct Bill Call Center

- Call Center Available
 - October 27, 2014 December 19, 2014
- Hours of Operation
 - 8:30 am 4:30 pm Monday Friday
- Call Center Phone Numbers
 - 1-866-541-7100 (Toll Free)
 - 1-785-296-1715 (Topeka)
- Closed for the following holidays
 - Tuesday, November 11 (Veteran's Day)
 - Thursday, November 27 & Friday, November 28 (Thanksgiving)

Resources

- Open Enrollment Information
 - 2015 Open Enrollment Booklet Online (charts included)
- Direct Bill Newsletter
 - Includes important reminders and announcements
- Medicare and You handbook for all Medicare participants
- Email SEHPMembership@kdheks.gov
- SEHP Website www.kdheks.gov/hcf/sehp
- Medicare Website <u>www.medicare.gov</u>
- Membership Portal https://sehp.member.hrissuite.com/

Resources

- Call Center Phone Numbers
 - 1-866-541-7100 (Toll Free)
 - 1-785-296-1715 (Topeka)
- Health Insurance Counseling (SHICK)
 - 1-800-860-5260
 - Department on Aging
 - County Extension Office
- Medicare
 - 1-800-633-4227
- Social Security Administration
 - 1-800-772-1213
 - 1-800-325-0778 (TTY)

Questions?

